

Appendix A National public health expenditure time series data

Table A1: Funding of public health expenditure, current prices, by source of funds, 2000-01 to 2005-06

Source of funds	2000-01		2001-02		2002-03	
	Amount (\$ million)	Share of total (per cent)	Amount (\$ million)	Share of total (per cent)	Amount (\$ million)	Share of total (per cent)
Funding by the Australian Government						
Direct expenditure	293.2	28.9	312.9	28.7	320.3	r26.7
Plus SPPs	252.6	24.9	260.0	23.8	386.3	r32.2
<i>Australian Government funding</i>	545.8	53.8	572.9	52.5	706.6	58.8
Funding by state and territory governments						
Gross expenditure	720.4	71.1	r778.1	71.3	r880.9	r73.3
Less SPPs	252.6	24.9	260.0	23.8	386.3	r32.2
<i>Net funding by the states and territories</i>	467.9	46.2	r518.1	47.5	r494.6	41.2
Total funding/expenditure	1,013.6	100.0	r1,091.0	100.0	r1,201.2	100.0

(continued)

Table A1 (continued): Funding of public health expenditure, current prices, by source of funds 2000–01 to 2005–06

Source of funds	2003–04		2004–05		2005–06	
	Amount (\$ million)	Share of total (per cent)	Amount (\$ million)	Share of total (per cent)	Amount (\$ million)	Share of total (per cent)
Funding by the Australian Government						
Direct expenditure	346.2	27.4	r471.1	r32.7	439.3	29.9
Plus SPPs	311.3	24.6	395.3	27.5	357.4	24.3
<i>Australian Government funding</i>	657.5	52.1	r866.4	r60.2	796.7	54.3
Funding by state and territory governments						
Gross expenditure	r916.7	72.6	r969.0	r67.3	1,028.6	70.1
Less SPPs	311.3	24.6	395.3	r27.5	357.4	24.3
<i>Net funding by the states and territories</i>	r605.4	47.9	r573.7	r39.8	671.2	45.7
Total funding/expenditure	r1,262.9	100.0	r1,440.1	100.0	1,467.9	100.0

Note: Components may not add to totals due to rounding. 'r' indicates that the data have been revised since the last report. The funding presented in this table is in current prices and should not be used to calculate real funding growth between time periods.

Table A2: Total funding by the Australian Government for expenditure on public health activities, current prices, by activity 2000-01 to 2005-06 (\$ million)

Activity	2000-01			2001-02			2002-03		
	Direct expenditure	SPPs to states and territories	Total	Direct expenditure	SPPs to states and territories	Total	Direct expenditure	SPPs to states and territories	Total
Communicable disease control	21.3	13.7	35.0	24.9	10.2	35.1	25.1	10.2	35.3
Selected health promotion	30.9	—	30.9	46.2	2.3	48.5	45.2	2.4	47.7
Organised immunisation	50.9	96.1	147.0	52.5	87.0	139.5	53.1	190.9	243.9
Environmental health	14.5	..	14.5	15.1	..	15.1	13.3	..	13.3
Food standards and hygiene	16.6	..	16.6	15.1	1.3	16.4	13.3	—	13.4
Breast cancer screening	3.3	..	3.3	1.6	..	1.6	1.6	..	1.6
Cervical screening ^(a)	61.8	..	61.8	66.9	4.6	71.5	62.8	4.7	67.5
Prevention of hazardous and harmful drug use	41.2	20.9	62.1	32.6	31.7	64.3	40.6	51.2	91.9
Public health research	52.4	0.2	52.6	57.7	0.2	57.9	65.0	0.2	65.1
PHOFAs	0.3	121.6	121.9	0.3	^(b) 122.9	123.2	0.3	^(b) 126.7	126.9
Total public health	293.2	252.5	545.7	312.9	260.2	573.1	320.3	386.3	706.6

(continued)

Table A2 (continued): Total funding by the Australian Government for expenditure on public health activities, current prices, by activity, 2000–01 to 2005–06 (\$ million)

Activity	2003–04			2004–05			2005–06		
	Direct expenditure	SPPs to states and territories	Total	Direct expenditure	SPPs to states and territories	Total	Direct expenditure	SPPs to states and territories	Total
Communicable disease control	30.4	10.6	41.0	38.6	5.8	44.4	35.9	9.2	45.1
Selected health promotion	44.3	2.5	46.8	40.4	0.1	40.5	41.6	—	41.6
Organised immunisation	49.5	141.2	190.8	136.2	187.2	323.3	132.5	123.5	256.0
Environmental health	19.2	..	19.2	17.0	..	17.0	15.1	..	15.1
Food standards and hygiene	14.6	0.9	15.5	14.0	0.4	14.4	15.0	..	15.0
Breast cancer screening	1.7	..	1.7	2.0	..	2.0	1.9	..	1.9
Cervical screening ^(a)	65.6	5.2	70.8	77.1	..	77.1	76.9	..	76.9
Prevention of hazardous and harmful drug use	52.0	19.7	71.7	68.0	55.0	123.0	27.5	64.7	92.2
Public health research	68.6	—	68.6	r77.5	0.3	r77.8	92.6	—	92.6
PHOFAs	0.3	^(b) 131.1	131.3	0.3	^(b) 146.6	146.9	0.3	^(b) 160.0	160.3
Total public health	346.2	311.3	657.4	r471.1	395.3	r866.5	439.3	357.4	796.7

(a) Includes Medicare expenditure that has a public health purpose.

(b) Does not include those SPPs to states and territories which have been included under the public health activities Organised immunisation and Cervical screening (see Table 2.4).

Note: Components may not add to totals due to rounding. 'r' indicates that the data have been revised since the last report. The funding presented in this table is in current prices and should not be used to calculate real funding growth between time periods.

Table A3: Total public health expenditure by the Australian Government and states and territories, current prices, by activity, 2000–01 to 2005–06 (\$ million)

Activity	2000–01			2001–02			2002–03		
	Australian Government ^(a)	State and territories ^(b)	Total	Australian Government ^(a)	State and territories ^(b)	Total	Australian Government ^(a)	State and territories ^(b)	Total
Communicable disease control	21.3	142.4	163.7	24.9	r160.8	r185.7	25.1	r175.0	r200.1
Selected health promotion	30.9	157.8	188.7	46.2	174.0	220.2	45.2	169.1	214.3
Organised immunisation	50.9	118.1	169.0	52.5	124.7	177.2	53.1	202.3	255.4
Environmental health	14.5	50.7	65.2	15.1	57.3	72.4	13.3	60.9	74.2
Food standards and hygiene	16.6	18.4	35.0	15.1	17.7	32.8	13.3	20.5	33.8
Breast cancer screening	3.3	92.5	95.8	1.6	95.6	97.2	1.6	95.9	97.5
Cervical screening	61.8	26.4	88.2	66.9	23.7	90.6	62.8	22.3	85.1
Prevention of hazardous and harmful drug use	41.2	101.4	142.6	32.6	105.6	138.2	40.6	112.7	153.3
Public health research	52.4	12.7	65.1	57.7	r18.8	r76.5	65.0	22.4	87.4
PHOFAS ^(c)	0.3	..	0.3	0.3	..	0.3	0.3	..	0.3
Total public health	293.2	720.4	1,013.6	312.9	r778.1	r1,091.0	320.3	r880.9	r1,201.2

(continued)

Table A3 (continued): Total public health expenditure by the Australian Government and states and territories, current prices, by activity, 2000–01 to 2005–06 (\$ million)

Activity	2003–04			2004–05			2005–06		
	Australian Government ^(a)	State and territories ^(b)	Total	Australian Government ^(a)	State and territories ^(b)	Total	Australian Government ^(a)	State and territories ^(b)	Total
Communicable disease control	30.4	r173.4	r203.8	38.6	r193.3	r231.9	35.9	211.8	247.7
Selected health promotion	44.3	172.1	216.4	40.4	192.4	232.8	41.6	210.3	251.9
Organised immunisation	49.5	218.6	268.1	136.2	202.1	338.3	132.5	188.2	320.7
Environmental health	19.2	60.8	80.0	17.0	66.3	83.3	15.1	69.7	84.8
Food standards and hygiene	14.6	20.8	35.4	14.0	18.6	32.6	15.0	19.2	34.2
Breast cancer screening	1.7	106.7	108.4	2.0	116.3	118.3	1.9	121.3	123.2
Cervical screening	65.6	23.5	89.1	77.1	r26.3	r103.4	76.9	27.6	104.5
Prevention of hazardous and harmful drug use	52.0	115.9	167.9	68.0	126.2	194.2	27.5	149.3	176.8
Public health research	68.6	24.9	93.5	r77.5	27.4	r104.9	92.6	31.1	123.7
PHOFAS ^(c)	0.3	..	0.3	0.3	..	0.3	0.3	..	0.3
Total public health	346.2	r916.7	r1,262.9	r471.1	r969.0	r1,440.1	439.3	1,028.6	1,467.9

(a) Australian Government direct expenditure reported here does not include its funding of state/territory expenditures through SPPs.

(b) Relates to activity-specific, program-wide and agency-wide expenditures incurred by state and territory governments, including expenditures that are wholly or partly funded through Australian Government SPPs to states and territories (see Glossary for an explanation of these terms).

(c) Relates to expenditure incurred by the Australian Government in administering funding under the PHOFAS.

Note: Components may not add to totals due to rounding. 'r' indicates that the data have been revised since last report. The expenditure presented in this table is in current prices and should not be used to calculate real growth in expenditure between time periods.

Table A4: Direct expenditure by the Australian Government for expenditure on public health activities, current prices, by activity, 2000–01 to 2005–06 (\$ million)

Activity	2000–01			2001–02			2002–03		
	Administered expenses ^(a)	Departmental expenses	Total	Administered expenses ^(a)	Departmental expenses	Total	Administered expenses ^(a)	Departmental expenses	Total
Communicable disease control	16.0	5.3	21.3	19.7	5.2	24.9	19.4	5.7	25.1
Selected health promotion ^(b)	22.7	8.2	30.9	37.5	8.8	46.2	37.0	8.2	45.2
Organised immunisation	49.3	1.6	50.9	50.8	1.7	52.5	51.2	1.8	53.1
Environmental health ^(c)	1.5	13.0	14.5	0.6	14.5	15.1	0.6	12.7	13.3
Food standards and hygiene ^(c)	2.8	13.9	16.6	2.4	12.8	15.1	0.5	12.9	13.3
Breast cancer screening	2.6	0.7	3.3	0.8	0.8	1.6	0.8	0.9	1.6
Cervical screening	61.1	0.7	61.8	66.1	0.8	66.9	61.9	0.9	62.8
Prevention of hazardous and harmful drug use ^(b)	27.4	13.8	41.2	26.2	6.4	32.6	33.8	6.8	40.6
Public health research	51.6	0.9	52.4	54.9	2.8	57.7	62.0	3.0	65.0
PHOFA administration	..	0.3	0.3	..	0.3	0.3	..	0.3	0.3
Total public health	235.0	58.4	293.2	259.0	54.1	312.9	267.2	53.2	320.3

(continued)

Table A4 (continued): Direct expenditure by the Australian Government for expenditure on public health activities, current prices, by activity, 2000–01 to 2005–06 (\$ million)

Activity	2003–04			2004–05			2005–06		
	Administered expenses ^(a)	Departmental expenses	Total	Administered expenses ^(a)	Departmental expenses	Total	Administered expenses ^(a)	Departmental expenses	Total
Communicable disease control	24.2	6.2	30.4	32.7	5.9	38.6	30.0	5.9	35.9
Selected health promotion ^(b)	35.1	9.3	44.3	35.4	5.0	40.4	36.6	5.0	41.6
Organised immunisation	47.5	2.0	49.5	134.4	1.8	136.2	130.7	1.8	132.5
Environmental health ^(c)	1.2	18.0	19.2	1.1	15.9	17.0	0.9	14.1	15.1
Food standards and hygiene ^(c)	0.8	13.8	14.6	0.2	13.8	14.0	0.9	14.1	15.0
Breast cancer screening	0.7	1.0	1.7	1.0	0.9	2.0	1.0	0.9	1.9
Cervical screening	64.7	1.0	65.6	76.2	0.9	77.1	75.9	0.9	76.9
Prevention of hazardous and harmful drug use ^(b)	44.5	7.5	52.0	66.9	1.1	68.0	26.0	1.4	27.5
Public health research	65.3	3.3	68.6	74.3	r3.2	r77.5	89.4	3.2	92.6
PHOFA administration	..	0.3	0.3	..	0.3	0.3	..	0.3	0.3
Total public health	284.0	62.4	346.2	422.2	r48.8	r471.1	391.4	47.6	439.3

(a) Does not include SPPs to states and territories.

(b) Departmental expenditures for *Selected health promotion* and *Prevention of hazardous and harmful drug use* are relatively higher than for other activities because they contain social marketing campaigns.

(c) Departmental expenditures on *Environmental health* and *Food standards and hygiene* are relatively higher than for other activities because they include operational expenditure for ARPANSA and FSANZ, respectively.

Note: Components may not add to totals due to rounding. 'r' indicates that the data have been revised since last report. The expenditure presented in this table is in current prices and should not be used to calculate real growth in expenditure between time periods.

Table A5: Average total government expenditure per person^(a) on public health activities, constant prices^(b), by states and territories^(c), 2003–04 (\$)

Activity	NSW	Vic	Qld	WA	SA	Tas	ACT ^(d)	NT	Total
Communicable disease control	10.61	10.04	7.75	8.73	11.56	6.67	17.90	83.36	10.56
Selected health promotion	8.05	15.75	9.06	12.18	11.85	15.42	14.98	14.71	11.20
Organised immunisation	15.66	11.67	12.76	13.43	11.87	11.92	19.99	45.03	13.88
Environmental health	2.90	2.02	4.56	7.48	4.92	9.53	10.05	28.01	4.13
Food standards and hygiene	1.93	1.44	1.58	1.87	1.71	1.08	8.50	4.63	1.83
Breast cancer screening	5.77	5.02	6.03	5.17	5.57	8.09	5.34	5.51	5.61
Cervical screening	4.09	4.45	4.72	4.91	5.42	5.16	4.58	14.12	4.62
Prevention of hazardous and harmful drug use	5.73	7.51	9.03	12.21	12.55	14.57	13.38	44.17	8.69
Public health research	3.87	6.20	3.69	5.89	6.26	4.25	4.32	6.59	4.83
Total for the nine activities	58.62	64.10	59.19	71.89	71.71	76.71	99.05	246.15	65.37

(a) The per person expenditure estimate for each activity is based on the total population for the jurisdiction concerned.

(b) Expenditure is expressed in terms of 2004–05 prices using the ABS chain price index for 'Hospital and nursing home services' (see Chapter 11, Section 11.1).

(c) Estimates and comparisons across states and territories need to be interpreted with care. For further information see pages 11 and 12 of this report. Also refer to the individual jurisdictions' chapters for more information on the expenditures incurred on the public health activities above.

(d) In the case of the Australian Capital Territory, although the expenditures are averaged across the territory's population, some of the activities covered by those expenditures are used by the population in the surrounding regions of New South Wales.

Table A6: Average total government expenditure per person^(a) on public health activities, constant prices^(b), by states and territories^(c), 2004–05 (\$)

Activity	NSW	Vic	Qld	WA	SA	Tas	ACT ^(d)	NT	Total
Communicable disease control	12.33	10.07	7.60	9.64	11.61	7.92	19.00	87.27	11.28
Selected health promotion	8.32	15.37	9.26	13.80	10.88	9.99	21.20	16.81	11.33
Organised immunisation	18.80	13.30	15.29	14.72	14.81	16.97	22.39	58.08	16.45
Environmental health	2.95	1.91	4.34	6.48	4.70	10.61	9.13	34.92	4.06
Food standards and hygiene	1.41	1.28	1.59	1.76	1.55	1.17	7.91	4.93	1.59
Breast cancer screening	6.46	5.09	5.83	4.97	5.05	8.44	5.08	6.04	5.76
Cervical screening	4.68	4.62	4.88	5.04	6.47	5.74	5.47	17.14	5.04
Prevention of hazardous and harmful drug use	5.50	8.14	11.14	12.69	14.33	12.33	14.65	53.38	9.44
Public health research	4.76	5.93	3.89	5.78	6.22	4.32	4.18	7.84	5.10
Total for the nine activities	65.22	65.71	63.85	74.88	75.63	77.50	109.03	286.43	70.06

(a) The per person expenditure estimate for each activity is based on the total population for the jurisdiction concerned.

(b) Expenditure is expressed in terms of 2004–05 prices using the ABS chain price index for 'Hospital and nursing home services' (see Chapter 11, Section 11.1).

(c) Estimates and comparisons across states and territories need to be interpreted with care. For further information see pages 11 and 12 of this report. Also refer to the individual jurisdictions' chapters for more information on the expenditures incurred on the public health activities above.

(d) In the case of the Australian Capital Territory, although the expenditures are averaged across the territory's population, some of the activities covered by those expenditures are used by the population in the surrounding regions of New South Wales.

Table A7: Average total government expenditure per person^(a) on public health activities, constant prices^(b), by states and territories^(c), 2005–06 (\$)

Activity	NSW	Vic	Qld	WA	SA	Tas	ACT ^(d)	NT	Total
Communicable disease control	12.37	10.38	8.95	10.49	11.33	9.31	18.91	69.28	11.55
Selected health promotion	8.02	15.84	10.01	13.59	10.67	13.00	23.03	36.52	11.75
Organised immunisation	16.01	13.56	13.33	14.52	12.04	17.22	17.90	62.50	14.96
Environmental health	3.12	2.31	4.45	5.93	4.42	6.29	8.57	25.79	3.95
Food standards and hygiene	1.70	1.08	1.60	1.62	1.46	1.23	7.28	3.76	1.60
Breast cancer screening	6.37	4.98	6.17	4.59	5.11	8.64	5.73	5.12	5.74
Cervical screening	4.25	4.44	5.10	4.85	6.33	5.69	5.00	18.39	4.87
Prevention of hazardous and harmful drug use	4.45	6.59	9.79	13.41	12.74	14.03	9.71	41.93	8.24
Public health research	6.00	6.00	4.70	6.10	6.37	4.85	4.71	9.77	5.77
Total for the nine activities	62.29	65.19	64.11	75.10	70.48	80.27	100.86	273.08	68.45

(a) The per person expenditure estimate for each activity is based on the total population for the jurisdiction concerned.

(b) Expenditure for 2004–05 is expressed in terms of 2004–05 prices using the ABS chain price index for 'Hospital and nursing home services' (see Chapter 11, Section 11.1).

(c) Estimates and comparisons across states and territories need to be interpreted with care. For further information see pages 11 and 12 of this report. Also refer to the individual jurisdictions' chapters for more information on the expenditures incurred on the public health activities above.

(d) In the case of the Australian Capital Territory, although the expenditures are averaged across the territory's population, some of the activities covered by those expenditures are used by the population in the surrounding regions of New South Wales.

Table A8: Total government expenditure on *Communicable disease control*, current prices, by category, 1999–00 to 2005–06 (\$ million)

Year	HIV/AIDS, hepatitis C and STI programs	Needle and syringe programs	Other communicable disease control	Total
1999–00	75.9	16.4	59.2	151.4
2000–01	78.4	23.2	62.0	163.7
2001–02	92.4	23.8	69.5	185.7
2002–03	92.4	26.3	81.4	200.1
2003–04	86.0	24.1	93.9	203.8
2004–05	105.6	28.3	98.0	231.9
2005–06	105.1	28.0	114.5	247.7

Note: The expenditure presented in this table is in current prices and should not be used to calculate real growth in expenditure between time periods.

Table A9: Total government expenditure on *Organised immunisation*, current prices, by category, 1999–00 to 2005–06 (\$ million)

Year	Organised childhood immunisation	Organised pneumococcal and influenza immunisation	All other organised immunisation	Total
1999–00	107.1	30.6	12.9	150.7
2000–01	117.9	28.6	22.5	169.0
2001–02	121.7	32.7	22.6	177.2
2002–03	185.7	33.3	36.3	255.4
2003–04	193.0	33.7	41.4	268.1
2004–05	242.2	56.6	39.4	338.3
2005–06	253.1	31.9	35.8	320.7

Note: The expenditure presented in this table is in current prices and should not be used to calculate real growth in expenditure between time periods.

Table A10: Total government expenditure on *Prevention of hazardous and harmful drug use*, current prices, by category, 1999–00 to 2005–06 (\$ million)

Year	Alcohol and tobacco programs	Illicit drugs and other drugs of dependence	Total
1999–00	45.7	72.1	117.9
2000–01	52.3	90.2	142.6
2001–02	58.3	79.9	138.2
2002–03	65.0	88.5	153.3
2003–04	75.0	92.9	167.9
2004–05	83.3	110.8	194.2
2005–06	61.0	115.7	176.8

Note: The expenditure presented in this table is in current prices and should not be used to calculate real growth in expenditure between time periods.

Table A11: Total government public health expenditure for each state and territory^(a), current prices 1999–00 to 2005–06 (\$ million)

Year	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
1999–00	279.6	210.4	150.1	97.9	80.1	26.7	27.3	42.2	914.3
2000–01	300.9	253.9	166.6	107.3	87.9	29.4	27.1	40.6	1,013.6
2001–02	326.9	268.4	184.5	117.7	92.7	31.7	27.9	41.5	1,091.0
2002–03	342.0	307.0	208.0	130.2	107.4	36.0	30.0	40.6	1,201.2
2003–04	378.5	305.7	220.6	137.0	106.2	35.6	31.2	48.0	1,262.9
2004–05	442.8	334.6	258.3	152.5	118.0	38.0	36.2	59.8	1,440.1
2005–06	441.2	346.3	270.5	159.7	114.8	41.0	34.9	59.5	1,467.9

(a) Total direct expenditure by the Australian Government has been apportioned to states and territories. For more information on the methods used, see Chapter 11 (pages 134–5).

Note: The expenditure presented in this table is in current prices and should not be used to calculate real growth in expenditure between time periods.

Table A12: Total recurrent health expenditure for each state and territory, current prices, 1999–00 to 2005–06 (\$ million)

Year	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
All funding sources									
1999–00	16,581	12,153	8,589	4,523	3,852	1,233	1,007	590	48,528
2000–01	18,064	13,767	9,789	5,103	4,183	1,339	933	632	53,810
2001–02	19,774	15,204	10,394	5,568	4,542	1,576	1,051	683	58,792
2002–03	21,187	16,664	11,298	6,281	5,068	1,502	1,169	771	63,941
2003–04	23,293	17,129	12,258	6,825	5,503	1,548	1,274	852	68,682
2004–05	25,440	18,825	13,431	7,519	5,977	1,669	1,403	932	75,196
2005–06	26,951	19,992	14,819	7,962	6,351	1,775	1,506	1,034	80,389
Government funding sources									
1999–00	11,528	7,893	6,103	3,146	2,888	866	767	473	33,663
2000–01	12,349	8,837	6,942	3,477	3,003	925	650	498	36,682
2001–02	13,328	9,761	7,224	3,617	3,163	1,115	729	529	39,466
2002–03	14,382	11,037	7,857	4,264	3,584	1,034	827	618	43,604
2003–04	16,006	11,111	8,534	4,666	3,878	1,077	876	696	46,843
2004–05	17,595	12,249	9,366	5,141	4,308	1,180	978	761	51,579
2005–06	18,631	13,003	10,402	5,398	4,570	1,251	1,055	834	55,143

Note: The expenditure presented in this table is in current prices and should not be used to calculate real growth in expenditure between time periods. Estimates of total recurrent health expenditure for previous years have been revised because of a reclassification of high-level aged residential care from health to welfare expenditure.

Appendix B Definition of public health activities

Communicable disease control

This includes all activities associated with the development and implementation of programs to prevent the spread of communicable diseases.

Expenditure on *Communicable disease control* is recorded using three subcategories:

- HIV/AIDS, hepatitis C and sexually transmitted infections
- Needle and syringe programs
- Other communicable disease control.

The public health component of the HIV/AIDS, hepatitis C and sexually transmitted infections strategies includes all activities associated with the development and implementation of prevention and education programs to prevent the spread of HIV/AIDS, hepatitis C and sexually transmitted infections.

Selected health promotion

This category includes those activities fostering healthy lifestyle and a healthy social environment overall, and health promotion activities focussing on health risk factors which lead to injuries, skin cancer and cardiovascular disease (such as diet, inactivity) that are delivered on a population-wide basis. The underlying criterion for the inclusion of health promotion programs within this category was that they are population health programs promoting health and wellbeing.

The *Selected health promotion* programs are:

- healthy settings (such as municipal health planning)
- public health nutrition
- exercise and physical activity
- personal hygiene
- mental health awareness promotion
- sun exposure and protection
- injury prevention including suicide prevention and female genital mutilation.

Organised immunisation

This category includes provision and administration of vaccines under the National Immunisation Program, immunisation clinics, school immunisation programs, immunisation education, public awareness, immunisation databases and information systems.

Expenditure on *Organised immunisation* is reported for each of the following three subcategories:

- *Organised childhood immunisation* (as defined under the Australian Government's National Immunisation Program).
- *Organised pneumococcal and influenza immunisation* – the target groups for pneumococcal immunisation are Indigenous people over 50 years and high-risk Indigenous younger people aged 15–49 years. Influenza vaccine is available free to all Australians 65 years of age and over, Indigenous people over 50 years and high-risk Indigenous younger people aged 15–19 years.
- *Other organised immunisation* (such as tetanus) – as opposed to ad hoc or opportunistic immunisation.

Environmental health

This category relates to health protection education (for example safe chemical storage, water pollutants), expert advice on specific issues, development of standards, risk management and public health aspects of environmental health protection. The costs of monitoring and regulating are to be included where costs are borne by a regulatory agency and principally have a public health focus (for example, radiation safety, and pharmaceutical regulation and safety).

Food standards and hygiene

This category includes the development, review and implementation of food standards, regulations and legislation as well as the testing of food by the regulatory agency.

Breast cancer screening

This category includes expenditure for the complete breast cancer screening pathway through organised programs.

The breast cancer screening pathway includes such activities as recruitment, screen taking, screen reading, assessment (this includes fine needle biopsy), core biopsy, open biopsy, service management and program management.

Cervical screening

This category relates to organised cervical screening programs such as the state cervical screening programs and rural access programs, including coordination, provision of screens and assessment services.

Cervical screening expenditure, funded through Medicare, for both screening and diagnostic services is also included. The method used to derive the estimates is set out in Section 11.2.

Prevention of hazardous and harmful drug use

This category includes activities aimed at the general population to reduce the overuse or abuse of alcohol, tobacco, illicit and other drugs of dependence, and mixed drugs. The

Australian Standard Classification of Drugs of Concern includes analgesics, sedatives and hypnotics, stimulants and hallucinogens, anabolic agents and selected hormones, antidepressants and antipsychotics, and miscellaneous drugs of concern.

Expenditure is to be reported for each subcategory as below, the aggregate of which will be total expenditure on *Prevention of hazardous and harmful drug use*:

- Alcohol
- Tobacco
- Illicit and other drugs of dependence
- Mixed.

Public health research

The definition of research and development (R and D) is as follows (ABS 1998:4):

‘R and D’ is defined according to the OECD standard as comprising creative work undertaken on a systematic basis in order to increase the stock of knowledge, including knowledge of man, culture and society, and the use of this stock of knowledge to devise new applications.

An ‘R and D’ activity is characterised by originality. It has investigation as a primary objective, the outcome of which is new knowledge, with or without a specific application, or new or improved materials, product, devices, processes or services. ‘R and D’ ends when work is no longer primarily investigative.

Thus the basic criterion for distinguishing ‘R and D’ from other public health activities is the presence in ‘R and D’ of an appreciable element of novelty and resolution of scientific and/or technical uncertainty.

Expenditures on general research and development work relating to the running of ongoing public health programs are included under the other relevant public health activities.

Glossary

Accrual accounting	The method of accounting most commonly used by governments in Australia. Relates expenses, revenues and accruals to the period in which they are incurred regardless of when payment is made or received (see also <i>Cash accounting</i>).
Activity-specific expenditures	Expenditures undertaken by cost centres that are specific to the public health activity categories. Examples include expenditure by the immunisation cost centre or the radiation safety cost centre. These expenditures include salary costs; staff on-costs; non-labour support costs such as office space, electricity, stationery, administrative and IT support; and program running costs such as travel, meetings, conferences and training.
Agency-wide expenditures	Expenditures of a corporate nature that support all the programs (core and non-public health programs) undertaken by the agency concerned. Includes human resource management, staff development, finance, legal and industrial relations activities.
Australian Government administered expenses	Expenses incurred by Department of Health and Ageing in administering resources on behalf of the Australian Government to contribute to the specified outcome (for example, most grants in which the grantee has some control over how, when and to whom funds are expended, including PHOFA payments and Specific Purpose Payments to state and territory governments) (see also <i>Australian Government departmental expenses</i>).
Australian Government departmental expenses	Those expenses incurred by the Department of Health and Ageing in the production of the department's outputs (mostly consisting of the cost of employees but also including suppliers of goods and services, particularly those where the Australian Government retains full control of how, when and to whom funds are provided).
Australian Government direct expenditure	Total expenditure actually incurred by the Australian Government on its own public health programs. It does not include the funding provided by the Australian Government to the states and territories by way of grants under Section 96 of the Constitution (see <i>PHOFAs</i> and <i>Specific Purpose Payments</i>).
Australian Government funding	The sum of Australian Government expenditure and Section 96 grants to states and territories.

Capital expenditure	Expenditure on fixed assets (e.g. new buildings and equipment with a useful life of more than a year).
Cash accounting	Relates receipts and payments to the period in which the cash transfer actually occurred. Does not have the capacity to reflect non-cash transactions, such as depreciation (see also <i>Accrual accounting</i>).
Centralised corporate services	Includes human resource management, staff development, finance and industrial relations.
Collection manual	A document agreed to by all jurisdictions that provides guidance on what activities constitute the nine public health activities and the procedures to be adopted in collecting and compiling the associated expenditure information.
Constant prices	Expenditure amounts for a particular year which have been adjusted for inflation. In this publication, the values for all periods have been expressed in terms of prices in the reference year 2004–05 (see also <i>Real expenditure</i>).
Current prices	Expenditure amounts for a particular year which have not been adjusted for inflation.
Essential vaccines	Refers to vaccines as defined under the Australian Government’s National Immunisation Program (see www.immunise.health.gov.au/internet/immunise/publishing.nsf/content/nips).
General Practice Immunisation Incentives scheme	An Australian Government initiative designed to boost the level of childhood immunisation by emphasising the role of GPs.
Government final consumption expenditure	Net expenditure on goods and services by general government bodies for current purposes (that is, outlays which do not result in the creation of capital assets, or in the acquisition of land and existing buildings or second-hand capital goods).
Indirect expenditure	Includes public or population health program-wide services that are less specific, such as epidemiology units, or public health policy and strategy units. It also usually includes agency-wide services such as corporate services or the office of the Chief Health Officer. Public health program-wide services and agency-wide services need to be apportioned across categories to estimate the overall expenditure required to deliver a particular public health expenditure output.
Jurisdictions	Australian, state and territory governments.
PHOFA administration	Expenditure incurred by the Australian Government in the administration of the PHOFAs.

PHOFAs	Payments made by the Australian Government to state and territory governments to support their public health programs through the Public Health Outcome Funding Agreements.
Program-wide expenditures	Public health expenditures associated with functions that support a number of public health activities. These include expenditure on information systems, disease surveillance and epidemiology, public health policy, program and legislation development, public health communication and advocacy, public and environmental health laboratory services, and public health research and development.
Public health	Organised response by society to protect and promote health, and to prevent illness, injury and disability. The starting point for identifying public health issues, problems and priorities, and for designing and implementing interventions is the population as a whole, or population subgroups (NPHP 1998). Does not include treatment services.
Public health activities	Nine types of activities undertaken or funded by the key jurisdictional health departments that tackle issues related to populations, rather than individuals.
Real expenditure	Amounts for a particular year that have been adjusted for inflation. In this publication, the values for all periods have been expressed in terms of prices in the reference year 2004–05 (see also <i>Constant prices</i>).
Recurrent expenditure	Expenditure incurred by organisations on a recurring basis. This excludes capital expenditure. In the case of recurrent health expenditure, capital depreciation is also excluded.
Specific Purpose Payments (SPPs)	Australian Government payments to the states and territories under the provisions of Section 96 of the Constitution, to be used for purposes specified in agreements between the Australian Government and individual state and territory governments. Some are conditional on states and territories incurring a specified level or proportion of expenditure from their own resources. PHOFA grants and grants to the states and territories for essential vaccines are examples of Specific Purpose Payments.

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